# VIBRATION ARTHROGRAPHY IN THE DIAGNOSIS OF DISEASES OF THE KNEE

**Vibration arthrography in the diagnosis of diseases of the knee**—*G. F. M. McCoy*, *J. D. McCrea*, *D. E. Beverland*, *W. G. Kernohan*, *S. N. Shaw* and *Professor R. A. B. Mollan* (Belfast) reported the early results of vibration arthrography in the diagnosis of internal derangements of the knee. Using a vibration-sensitive recording and analysis system, 250 subjects with symptomatic knee joints were examined. All subjects subsequently underwent arthroscopy by an experienced independent arthroscopist.

A close association was observed between signals recorded and pathology as demonstrated by arthroscopy. The various types of meniscal lesion produced characteristic tracings. Other varieties of intra-articular pathology, such as synovial plicae and chondromalacia patellae, produced characteristic waveforms. Surgery had a profound effect on the meniscal signal. In most cases reviewed, the signal had completely resolved. In others, the energy measured had been greatly reduced. Vibration arthrography was therefore not only a diagnostic tool with an accuracy rate approaching 90%, but an excellent objective assessment of the efficiency of arthroscopic meniscectomy.

They envisaged multi-channel analysis at "real-time" as the next step towards the early development of a viable knee screener.

**Histological types of bone weakness underlying femoral neck fractures: are there any differences between trochanteric and subcapital fractures?**—*Z. A. Ráliš*, *J. Lane*, *G. Watkins*, *H. Ráliš*, *I. G. Mackie* and *C. Johnson-Nurse* (Cardiff) had studied iliac